

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO.

10/586,206

FILING DATE

7-13-06

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1		1			
2		1	1			
3	2		1			
4	2		1			
5	1		1			
6	1		1			
7	1		1			
8			1			
9			1			
10			1			
21			1			
12			1			
13			1			
14			1			
25	1		1			
16	1		1			
27	1		1			
18	1		1			
19	1		1			
20	1		1			
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50						
TOTAL IND.	1	↓	1	↓		↓
TOTAL DEP.	21	←	19	←	←	
TOTAL CLAIMS	22		20			

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
51						
52						
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99						
100						
TOTAL IND.		↓		↓		↓
TOTAL DEP.		←		←	←	
TOTAL CLAIMS						